

DEPARTMENT OF HUMAN SERVICES
DIVISION OF JUVENILE JUSTICE SERVICES
POLICY AND PROCEDURES

Policy No: 07-01	Effective Date: 10/15/04	Revision Date: 07/31/12
Subject: Non-Emergency Medical and Dental Services		

I. Policy Statement

Division facilities and programs shall provide for non-emergency medical and dental services as reasonably needed for juveniles placed in Division custody, using the services of licensed health care and dental care providers, on- or off-site, and shall ensure that records of such services are maintained and treated with appropriate protection of privacy.

II. Rationale

The Division has an obligation to protect the health of juveniles in Division custody, which includes implementing procedures to assess their needs for medical or dental services, and to arrange for those services to be provided by licensed providers.

III. Definitions

“HIPAA” known as the Health Insurance Portability and Accountability Act, protects the privacy of patients in a healthcare setting and prevents the disclosure of personal information of patients other than what is necessary, or in some cases, only in emergency settings.

“GRAMA” known as the Government Records Access and Management Act, are the rules for the handling of records released to the public and retained by the Division as identified in UT Code, beginning with Title 63G-2.

IV. Procedure

A. Identifying needs for medical and dental services.

1. Initial assessments for medical care needs.
 - a. Initial Health Screen. An Initial Health Screen procedure (see attached form) shall be completed by facility staff upon intake for every juvenile admitted into a residential facility, and shall be reviewed by nurse personnel within forty-eight (48) hours, not including weekends and holidays.
 - b. Nursing Assessment. A nursing assessment shall be completed on every juvenile *admitted into a residential facility*. It shall be completed within fourteen (14) days, and shall be administered by qualified health care personnel. The nursing assessment shall address the following:

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- (i) Current illnesses and health problems, including mental, dental, and communicable diseases.
 - (ii) Medications taken and special health requirements.
 - (iii) Use of alcohol and other drugs, and history of usage and problems associated with usage.
 - (iv) Immunizations status and records.
 - (v) Other health problems and gynecological history of problems for females.
 - (vi) Notes on observation of behavior and appearance.
 - (vii) Bodily deformities and ease of movement.
 - (viii) Condition of skin, marks, lesions, rashes, needle marks, any other.
 - (ix) Need for referrals to appropriate health care services (either later, or on an emergency basis, when deemed necessary).
- c. Medical Assessment. A medical assessment exam shall be conducted of every juvenile committed to the Division's custody. It shall be conducted within thirty- (30) days of placement, and administered by the facility or program. The medical assessment shall include but not be limited to the following areas:
 - (i) Review of the initial health screening results.
 - (ii) Collection of additional data to complete the medical, psychiatric, and dental exams.
 - (iii) Laboratory and/or diagnostic tests to detect communicable diseases, including venereal disease and tuberculosis.
 - (iv) Recording of height, weight, pulse, blood pressure, and temperature.
 - (v) Other tests and examinations as appropriate.
 - (vi) Review of the results of the medical examinations' tests and identification of problems.
 - (vii) Initiation of therapy when appropriate.
 - (viii) Follow-up on immunization schedule, as required.
- 2. Scheduled sick call & individual complaints of illness or injury.
 - a. Each facility or program shall have in place procedures for routine monitoring of the health of juveniles in their custody, including a scheduled "sick call" procedure for reporting of illness or injury.
 - b. Staff shall document medical complaints or sick call for each resident for non-emergency illnesses or injuries.

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- c. When illness or injuries are reported, staff of the facility or program shall contact the designated qualified health care providers for further instructions.

B. Non-emergency medical treatment (on-site or off-site).

1. Routine and other non-emergency medical services shall be performed by the facility's medical personnel or performed by qualified health care personnel:
 - a. Case managers, guardians, and facility staff shall make arrangements for the provision of outpatient services that are not available within the facility. The determination for the necessity of these services shall be made by trained medical staff and approved by the facility director.
 - b. When the program's health care staff refers a juvenile to receive services from a juvenile's private health care provider, staff shall contact the juvenile's parent, guardian, or case manager for further instructions.
 - c. In-patient hospital care shall be available, when required, as determined by a health care provider. Arrangements for security precautions and supervision during extended hospital care for juveniles who have been placed in secure facilities shall be the responsibility of facility staff.
2. Transportation and security for off-site non-emergency medical care:
 - a. Staff shall follow approved transportation procedures whenever transporting juveniles for routine and other non-emergency medical visits and shall document any medical and transport information.
 - b. Staff shall accompany juveniles to all appointments and maintain supervision needed according to program Operational Manuals.
 - c. Juveniles in detention or secure care who require emergency transport and/or hospitalization shall be supervised by Division staff. Arrangements for supervision are the responsibility of facility staff.

C. Special medical cases.

1. Communicable Diseases:

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- a. Staff shall take universal precautions to prevent the spread of communicable diseases from juveniles to other juveniles, staff and volunteers, and the general public.
 - b. Juveniles receiving services by the Division shall not be denied access to services solely because of being infected with communicable diseases.
 - c. All medical information will be released according to HIPPA and GRAMA standards.
2. Special diets and activities based on medical conditions:
- a. Conditions such as diabetes and obesity, as well as, temporary conditions, such as pregnancy and post-oral surgery, require individual attention.
 - b. Program staff at the direction of medical staff shall be responsible for providing individualized menus for juveniles who cannot eat from the regular menu.
3. Pregnant juveniles---special care

Juveniles who are pregnant shall receive regular prenatal care coordinated by their guardian, and or case manager, to include medical examinations, appropriate activity levels, safety precautions, nutrition guidance and counseling. Pregnant juveniles who remain in a facility shall be monitored by a physician (ordinarily the same physician who will deliver the child) and arrangements will be made for hospitalization and delivery.

D. Dental care: needs assessments and non-emergency services.

1. Dental care screening and services shall be conducted within thirty (30) days of placement by the facility or program for juveniles who have been committed to the Division's custody for *Community Placement or Secure confinement*. This shall include the following items:
 - a. Dental screening shortly after admission.
 - b. Dental examination after admission to include the taking or reviewing the patient's dental history, charting, and examination.
 - c. Fluoride toothpaste shall be available for all juveniles.

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- d. Instructions on oral hygiene and dental education.
 - e. Dental treatment as determined by a dentist.
 - f. Crowns and other major dental improvements shall only be done with the expressed written consent of the facility director.
2. A dental care screening shall be conducted within thirty (30) days of placement by the facility or program for juveniles who have been committed to the Division's custody for *Observation and Assessment*. This shall include the following items:
- a. Dental screening (a visual check by the nurse), shortly after admission.
 - b. Fluoride toothpaste shall be available for all residents.
 - c. Instructions on oral hygiene and dental education.
 - d. In the event the nurse observes obvious dental problems or the juvenile expresses concern over his/her dental condition, the juvenile will be referred to a dentist for examination and treatment as determined by the dentist.
 - e. Crown or other major dental improvement shall only be done with the expressed written consent of the facility director.
- E. Emergency Medical or Dental Treatment.

See Division Policy 07-02 (Emergency Medical or Dental Services).

F. Recordkeeping and Confidentiality of Records.

All medical and dental services received by a juvenile while in the Division's custody shall be documented, and records shall be maintained and kept confidential according to the facility and program requirements, and Division Policy 07-04 (Medical and Dental Records).

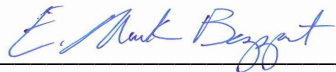
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V. Continuous Renewal

This policy shall be reviewed every three (3) years to determine its effectiveness and appropriateness. This policy may be reviewed before that time to reflect substantive change.

This policy has been reviewed by the Board of Juvenile Justice Services and is approved upon the signature of the Director.



E. Mark Bezzant, Chair
Board of Juvenile Justice Services

07/31/12

Signature Date



Susan V. Burke, Director
Division of Juvenile Justice Services

07/31/12

Signature Date